FORM D

UNITED STATES

SECURITIES AND EXCHANGE GOMM

Washington, D.C. 20549

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DATE RECEIVED

OMB APPROVAL

3235-0076

OMB Number:



NOTICE OF SALE OF SEGURITIES PURSUANT TO REGULATION **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment at d name has changed, and indicate change.) Issuance of Convertible Notes, and the underlying stock in which they may be converted	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Sweet Leaf Tea Company	
Address of Executive Offices (Number and Street, City, State, Zip Code) 507 Pressler Street, Austin, TX 78703	Telephone Number (Including Area Code) 512.328.7775
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Maker and distributor of bottled tea	PROCESSEL
Type of Business Organization Corporation limited partnership, already formed limited partnership, to be formed othe	JAN 1 4 2008 THOMSON r (please specific ANOIA)
Actual or Estimated Date of Incorporation or Organization: Month Year 0 4 0 2 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for S CN fcr Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be fi ed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precont ition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state Liw. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC II	DENTIFICATION DATA		
 Each beneficial owner Each executive office 	issuer, if the issuer has er having the power to	as been organized within the vote or dispose, or direct to orate issuers and of corporate			equity securities of the issuer; suers; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Christopher, Clayton					
Business or Residence Addres	ss (Number and Street	t, Ci.y, State, Zip Code)			
c/o Sweet Leaf Tea Compan	y, 507 Pressler Stree	et, Austin, TX 78703			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Christopher, Todd					
Business or Residence Address	ss (Number and Street	t, Ci y, State, Zip Code)			
c/o Sweet Leaf Tea Compan	y, 507 Pressler Stree	et, A 1stin, TX 78703			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Leyerle, Mark					
Business or Residence Address c/o Freestone Partners, 808	•	•	12		
Check Box(es) that Apply:	Promoter	Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			_	
Lieberman, Craig					<u> </u>
Business or Residence Address	ss (Number and Street	et, City, State, Zip Code)			
4265 San Felipe, Suite 1100,	Houston, TX 77027	<u> </u>			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	findividual)				
McGaughey, William					
Business or Residence Addres	ss (Number and Stree	et, City, State, Zip Code)			
106 Deerfield, Lufkin, TX 7	5901				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	f individual)				
SLT Interests, LLC					· · · · · · · · · · · · · · · · · · ·
Business or Residence Addre	ss (Number and Stree	et, City, State, Zip Code)			
5847 San Felipe, Suite 4350.	, Houston, TX 77057	7			
Check Box(es) that Apply:	Promoter	Beneficial Owne	r 🔲 Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Freestone Beverage Partner	rs, LP				· <u>· · · · · · · · · · · · · · · · · · </u>
Business or Residence Addre	ess (Number and Stree	et, Cit /, State, Zip Code)		-	
c/o Freestone Partners, 808	Travis Street, Suite	808, Houston, TX 7700	2		

				B	INFOR	MATION A	BOUT OF	FERING				
1. Has	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							•••••	Yes	No		
2. Wha	Answer also in Appendix, Column 2, it filing under OLOE. What is the minimum investment that will be accepted from any individual?							s	n/a			
							Yes	No				
	Does the offering permit joint ownership of a single unit?									Ш	×	
remu perso than	neration for sol on or agent of a five (5) persons	icitation of pr broker or dea	urchasers in c ler registered	connect on w I with the SE	ith sales of se C and/or with	curities in the	e offering. If ates, list the r	a person to b ame of the b	e listed is an oker or deal	associated er. If more		
	r only. (Last name fir	st, if individu	al)									
Business o	r Residence Ad	ldress (Numb	per and Street	t, City, State,	, Zip Code)							
Name of A	ssociated Brok	er or Dealer										
States in V	Vhich Person L	isted Has Sol	icited or Inte	nds to 5 olici	it Purchasers							· · · · · · · · · · · · · · · · · · ·
(Check	"All States" or	check indivi	duals States)		·····						☐ A	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]]	[MI]	[MN]	[MS]	[MO]
					Data	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	F 3	r i					
[MT] [RI]	[NE]	[NV] [SD]	[NH] [TN]	(LXI)	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]
[RI]	• •	[SD]	[TN]	•	, ,			[WA]	[WV]	[WI]	[WY]	[PR]
[RI] Full Name	[SC]	[SD]	(TN)	(тх)	[UT]			[WA]	[WV]	[WI]	[WY]	[PR]
[RI] Full Name Business ([SC]	[SD] st, if individu	(TN)	(тх)	[UT]			[WA]	[WV]	[WI]	[WY]	[PR]
[RI] Full Name Business of	[SC] (Last name fir or Residence Ad	[SD] st, if individu ddress (Numb	[TN]	[TX]	[UT]	[VT]		[WA]	[WV]	[WI]	[WY]	[PR]
[RI] Full Name Business of A States in V	[SC] (Last name fire or Residence Adaptive Associated Brokensee	[SD] st, if individu ddress (Number er or Dealer isted Has Sol	[TN] Deer and Stree	t, City, State	[UT] , Zip Code)	[VT]	[VA]					[PR]
[RI] Full Name Business of A States in V	[SC] (Last name fir or Residence Ad Associated Brok Which Person L	[SD] st, if individu ddress (Number er or Dealer isted Has Sol	[TN] Deer and Stree	t, City, State	[UT] , Zip Code)	[VT]	[VA]					
[RI] Full Name Business of Name of A States in V (Check [AL]	[SC] (Last name fir or Residence Ad Associated Brok Which Person L "All States" or [AK]	[SD] st, if individu ddress (Numb eer or Dealer isted Has Sol check indivi	(TN) Der and Stree Licited or Interduals States)	t, City, State	[UT] , Zip Code) it Purchasers	[VT]	[VA]	[DC]	[FL]	[GA]	□ A [H1]	Il States [ID]
[RI] Full Name Business of A States in V (Check [AL] [IL]	[SC] (Last name fire or Residence Advanced Broken Person Let "All States" or [AK]	[SD] st, if individual ddress (Number or Dealer isted Has Sol check indivi [AZ] [IA]	(TN) Deer and Stree dicited or Interduals States) [AR] [KS]	t, City, State	(UT) , Zip Code) it Purchasers [CO] [LA]	[VT]	[VA]	[DC]	[FL] [MI]	[GA] [MN]	[HI]	Il States [ID] [MO]
[RI] Full Name Business of Name of A States in V (Check [AL]	[SC] (Last name fir or Residence Ad Associated Brok Which Person L "All States" or [AK]	[SD] st, if individu ddress (Numb eer or Dealer isted Has Sol check indivi	(TN) Der and Stree Licited or Interduals States)	t, City, State	[UT] , Zip Code) it Purchasers	[VT]	[VA]	[DC]	[FL]	[GA]	□ A [H1]	Il States [ID]
[RI] Full Name Business of A States in V (Check [AL] [IL] [MT]	[SC] (Last name fire or Residence Advanced Broken Person L "All States" or [AK] [IN] [NE]	[SD] st, if individual ddress (Number or Dealer isted Has Sol check indivi- [AZ] [IA] [NV] [SD]	(TN) Der and Stree dicited or Inte duals States) [AR] [KS] [NH] [TN]	t, City, State	(UT) , Zip Code) it Purchasers [CO] [LA] [NM]	[VT] [CT] [ME] [NY]	[VA] [DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
RIJ Full Name Business of Name of A States in V (Check [AL] [IL] [MT] [RI] Full Name	[SC] (Last name fire or Residence Act Associated Broke Which Person L. "All States" or [AK] [IN] [NE] [SC]	[SD] st, if individual	[TN] Der and Stree Licited or Inter duals States) [AR] [KS] [NH] [TN]	t, City, State ands to Solic [CA] [KY] [NJ] [TX	(UT) , Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[VT] [CT] [ME] [NY]	[VA] [DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
[RI] Full Name Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name	[SC] (Last name fire or Residence Action Residence (AK) [IN] [NE] [SC] (Last name fire	[SD] st, if individual	(TN) Der and Stree Dicited or Inter duals States) [AR] [KS] [NH] [TN] ber and Stree	t, City, State ands to Solic [CA] [KY] [NJ] [TX	(UT) , Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[VT] [CT] [ME] [NY]	[VA] [DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
[RI] Full Name Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business	[SC] (Last name fire or Residence Acts associated Broken Person L. "All States" or [AK] [IN] [NE] [SC] (Last name fire or Residence Acts associated Broken Person L.	[SD] st, if individual ddress (Number or Dealer isted Has Sol check indivi- [AZ] [IA] [NV] [SD] st, if individual ddress (Number or Dealer	(TN) Deer and Stree dicited or Inter duals States) [AR] [KS] [NH] [TN] ber and Stree	t, City, State ands to Solic [CA] [KY] [TX]	[UT] , Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[VT] [CT] [ME] [NY] [VT]	[VA] [DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	Il States [ID] [MO] [PA]
[RI] Full Name Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business Name of A	[SC] (Last name fire or Residence Addressed Broken Person L. "All States" or [AK] [IN] [NE] [SC] (Last name fire or Residence Addressed Broken Person L. Which Person L.	[SD] st, if individual dress (Number or Dealer isted Has Sol check individual [NV] [SD] st, if individual ddress (Number or Dealer isted Has So	(TN) Der and Stree Clicited or Inter duals States) [AR] [KS] [NH] [TN] ber and Stree Clicited or Inter Click or Inter	t, City, State conds to Solic [CA] [KY] [NJ] [TX'	[UT] (Zip Code) (t Purchasers [CO] [LA] [NM] [UT] (c), Zip Code)	(CT) [ME] [NY] [VT]	[VA] [DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	Il States [ID] [MO] [PA]
[RI] Full Name Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business Name of A	[SC] (Last name fire or Residence Acts associated Broken Person L. "All States" or [AK] [IN] [NE] [SC] (Last name fire or Residence Acts associated Broken Person L.	[SD] st, if individual dress (Number or Dealer isted Has Sol check individual [NV] [SD] st, if individual ddress (Number or Dealer isted Has So	(TN) Der and Stree Clicited or Inter duals States) [AR] [KS] [NH] [TN] ber and Stree Clicited or Inter Click or Inter	t, City, State conds to Solic [CA] [KY] [NJ] [TX'	[UT] (Zip Code) (t Purchasers [CO] [LA] [NM] [UT] (c), Zip Code)	(CT) [ME] [NY] [VT]	[VA] [DE] [MD] [NC]	[DC] [[MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	Il States [ID] [MO] [PA] [PR]
[RI] Full Name Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business Name of A	[SC] (Last name fire or Residence Advanced Broken Person L. "All States" or [AK] [IN] [NE] [SC] (Last name fire or Residence Advanced Broken Person L. "All States" or Residence Advanced Broken Person L. "All States" or "All States	[SD] st, if individual	[TN] Der and Stree Licited or Inter duals States) [AR] [KS] [NH] [TN] Der and Stree Licited or Inter duals States)	t, City, State CAI [KY] [TX] [TX]	[UT] , Zip Code) it Purchasers [CO] [LA] [NM] [UT]	[VT] [CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [[MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	Il States [ID] [MO] [PA] [PR]
[RI] Full Name Business of A States in V (Check [AL] [IL] [MT] [RI] Full Name Business Name of A States in V (Check [AL]	[SC] (Last name fire or Residence Addressed Broken Person L. "All States" or [AK] [IN] [NE] [SC] (Last name fire or Residence Addressed Broken Person L. "All States" or Residence Addressed Broken Person L. "All States" or [AK] [IN]	[SD] st, if individual diress (Number or Dealer isted Has Sol check individual [IA] [INV] [SD] st, if individual diress (Number or Dealer isted Has Sol check individual diress (Number or Dealer isted Has Sol check individual [AZ]	[TN] Der and Stree duals States) [AR] [KS] [NH] [TN] ber and Stree dicited or Interior in the interior	t, City, State (CA) [KY] [TX' tt, City, State ends to Solic	[UT] (Zip Code) (t Purchasers [CO] [LA] [NM] [UT] (t Purchasers [CO]	(CT) [ME] [VT]	[VA] [DE] [MD] [VA]	[DC]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] A [HI] A [HI]	Il States [ID] [MO] [PA] [PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security		ggregate ering Price	Amo	unt Already Sold
	Debt	\$	0	\$. 0
	Equity	\$	0	S	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	S	1,250,000.00	S	1,250,000.00
	Partnership Interests	s	0	S	0
	Other (Specify)	s	0	s	0
	Total	S :	1,250,000.00	s	1,250,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the agg egate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number nvestors	Dol	ggregate lar Amount Purchase
	Accredited investors		22	\$ <u>1</u>	,250,000,00
	Non-accredited Investors			\$	
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of Offering		Type of Security	Dol	lar Amount Sold
	Rule 505		•	s	
	Regulation A			s	
	Rule'504			\$	
	Total			s	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			s	•
	Legal Fees		\boxtimes	s	15,000.00
	Accounting Fees			\$	
	Engineering Fees			\$	· · · · · ·
	Sales Commissions (specify finders' fees separately)			s	
	Other Expenses (identify)			s_ _	
	Total			S	15,000.00

	C. OFFERING	g price, number of investors, expenses and	USE OF PROCEEDS	
total expenses fu	ırnished in response to Par	ate offering price given in response to Part C - Question 1 and t C - Question 4.a. This difference is the "adjusted gross	d	\$ <u>1,235,000.00</u>
the purposes sho left of the estima	wn. If the amount for any p	ross proceeds to the issuer used or proposed to be used for each ourpose is not known, furnish an estimate and check the box to ents listed must equal the adjusted gross proceeds to the issuer above.	the	
·	·		Payments to Officers, Directors & Affiliates	Payments To Others
Salaries and fee	s		. 🗆 s	□ s
Purchase of real	l estate		🗆 s	□ s
Purchase, rental	or leasing and installation	of mac rinery and equipment	. 🗆 \$	□ s
Construction or	leasing of plant buildings	and facilities	. 🗆 s	□ s
Acquisition of oused in exchang	other businesses (including ge for the assets or securition	the value of securities involved in this offering that may be es of another issuer pursuant to a merger)	🗆 \$	□ \$
Repayment of it	ndebtedness		🗆 s	□ s
Working capital	1		🗆 s	S 1,235,000.0
Other (specify):			🗆 s	□ s
Column Totals.			🗀 \$	\$1,235,000.0
Total Payr	ments Listed (column total	s added)	🛛 \$ 1,2:	35,000.00
		D. FEDERAL SIGNATURE		
	 -	by the undersigned duly authorized person. If this notice is filed to	under Rule 505, the followin	g signature constitute
indertaking by the issi		rities and Exchange Commission, upon written request of its staf		
indertaking by the issu- accredited investor pur	uer to furnish the U.S. Secu rsuant to paragraph (b)(2) of	rities and Exchange Commission, upon written request of its staff Rule 50:	f, the information furnished	
undertaking by the issu	uer to furnish the U.S. Secursuant to paragraph (b)(2) of the paragraph (b)(2)	rities and Exchange Commission, upon written request of its staff Rule 50:	f, the information furnished	



Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)